



Insurance Fund 2876

Patent

Attorney Docket: 156906-0008

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Philippe A. CHARRIN

Serial No.: 09/903,322

Filed: July 10, 2001

For: COMBINED CARD READER AND
BILL ACCEPTOR

Customer No.: 29000

Confirmation No.: 7395

Group Art Unit: 2876

Examiner: Franklin, Jamara

Office Action Mailed:
January 11, 2005

AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment and Response to Office Action for the above-identified application.

- ☒ Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(4)] for the total number of months checked below:

EXTENSION (months)		FEE FOR SMALL ENTITY		FEE FOR OTHER THAN SMALL ENTITY
1 month	<input checked="" type="checkbox"/>	\$60.00	<input type="checkbox"/>	\$120.00
2 months	<input type="checkbox"/>	\$225.00	<input type="checkbox"/>	\$450.00
3 months	<input type="checkbox"/>	\$510.00	<input type="checkbox"/>	\$1,020.00
4 months	<input type="checkbox"/>	\$795.00	<input type="checkbox"/>	\$1,590.00

CERTIFICATE OF MAILING UNDER 37 CFR 1.8

I hereby certify that this document (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450/2005 KHAWKIN1 00000002 090946 09903322

Date: May 11, 2005

Sent by: Connie Kwon

Signature:

Connie Kwon
03 10:22:51 00.00 DA

- ☐ An extension for _____ months has already been secured and the fee paid therefor of _____ is deducted from the total fee due for the total months of extension now requested.
- ☒ Extension fee due with this Request \$60.00.
- ☐ **NO ADDITIONAL EXTENSION FEE IS REQUIRED.**

FEES FOR CLAIMS:

- ☒ Applicant claims small entity status under 37 CFR 1.27.

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

Total Claims	45	-	41	=	4	x	\$50.00	\$200.00
Independent Claims	5	-	4	=	1	x	\$200.00	\$200.00
Multiple Dependent Claims	\$360	(if applicable)					<input type="checkbox"/>	\$0.00
TOTAL OF ABOVE CALCULATIONS								\$400.00
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.								<input checked="" type="checkbox"/> \$200.00
Extension Fee								\$60.00
TOTAL FEES SUBMITTED HERewith								\$260.00


- ☐ No additional fee is required.
- ☐ A check in the amount of _____ is enclosed to cover the above fee(s).
- ☒ Charge Deposit Account No. 09-0946 in the amount of \$260.00.
- ☒ The Commissioner is authorized to charge Counsel's Deposit Account No. 09-0946 for any fees required under 37 CFR §§ 1.16, 1.17 and 1.445 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account 09-0946.

Respectfully submitted,

IRELL & MANELLA LLP

Dated: May 11, 2005

By: _____


Christopher A. Vanderlaan
Reg. No. 37,747

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2004

Application or Docket Number

09/903322

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	41 minus 20 =	21
INDEPENDENT CLAIMS	4 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE ☐

OR OTHER THAN
SMALL ENTITY

RATE	FEE
BASIC FEE	395.00
X 9	189
X 40	40
+	
TOTAL	pd.

RATE	FEE
BASIC FEE	790.00
X	
X	
+	
TOTAL	

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	45 Minus	41	= 4
Independent	5 Minus	4	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE
X 25	100
X 100	100
+	
TOTAL	pd.

RATE	ADDITIONAL FEE
X	
X	
+	
TOTAL	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	Minus		
Independent	Minus		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X	
X	
+	
TOTAL	

RATE	ADDITIONAL FEE
X	
X	
+	
TOTAL	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	Minus		
Independent	Minus		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X	
X	
+	
TOTAL	

RATE	ADDITIONAL FEE
X	
X	
+	
TOTAL	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.